POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA		11-14-01
O.I.P.E. CLASSIFIER		12	11/20
FORMALITY REVIEW	CH	1119	11-29-01
RESPONSE FORMALITY REVIEW	AM	917	02-05-02

INDEX OF CLAIMS

✔ ..... Rejected	N ..... Non-elected
= ..... Allowed	I ..... Interference
− (Through numeral)... Canceled	A ..... Appeal
÷ ..... Restricted	O ..... Objected

Claim Final	Original	Date 1 8 04	9 2 04							
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If more than 150 claims or 10 actions
staple additional sheet here

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